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JC962 U.S. PTO

Please type a plus sign (+) inside this ☐PTO/SB/05 (11-00)  
A for use through 10/31/2002. OMB 0651-0032U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.UTILITY  
PATENT APPLICATION  
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	4666US (REN/P21799US00)
First Inventor	Gilles P. van Wezel et al.
Title	REDUCING BRANCHING AND ENHANCING FRAGMENTATION IN CULTURING FILAMENTOUS MICROORGANISMS
Express Mail Label No.	EL 740534360 US

09/749185  
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## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

- ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
- ☒ Applicant claims small entity status.  
See 37 CFR 1.27.
- ☒ Specification [Total Pages 31]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
- ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 15]
- Oath or Declaration [Total Pages     ]
  - ☐ Newly executed (original or copy)
  - ☐ Copy from a prior application (37 CFR 1.63 (d))  
(for continuation/divisional with Box 18 completed)
    - ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
- ☐ Application Data Sheet. See 37 CFR 1.76

## ADDRESS TO:

Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

- ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
- Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - ☐ Computer Readable Form (CRF)
  - Specification Sequence Listing on:
    - ☐ CD-ROM or CD-R (2 copies); or
    - ☒ paper
  - ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

- ☐ Assignment Papers (cover sheet & document(s))
- ☐ 37 CFR 3.73(b) Statement of Power of Attorney  
(when there is an assignee)
- ☐ English Translation Document (if applicable)
- ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS Citations
- ☒ Preliminary Amendment
- ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
- ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
- ☐ Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
- ☐ Other: .....

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

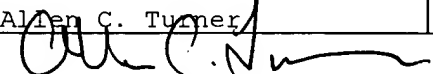
☐ Continuation    ☐ Divisional    ☐ Continuation-in-part (CIP)    of prior application No.: \_\_\_\_\_ / \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_ Group Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	<div style="border: 1px solid black; width: 150px; height: 20px; text-align: center; font-size: small;">(Insert Customer No. or Attach bar code label here)</div>		or	<input type="checkbox"/> Correspondence address below
Name				
Address				
City		State	Zip Code	
Country		Telephone	Fax	

Name (Print/Type)	Allen C. Turner	Registration No. (Attorney/Agent)	33, 041
Signature		Date	12/26/00

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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**FEE TRANSMITTAL  
for FY 2001**

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT** (\$427.00)**Complete if Known**

Application Number	Not Yet Assigned
Filing Date	December 26, 2000
First Named Inventor	Gilles P. van Wezel et al.
Examiner Name	Unknown
Group Art Unit	Unknown
Attorney Docket No.	4666US (REN/P21799US00)

**METHOD OF PAYMENT**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 20-1469  
 Deposit Account Name Trask Britt

☒ Charge Any Additional Fee Required  
Under 37 CFR 1.16 and 1.17☒ Applicant claims small entity status.  
See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:**

☒ Check ☐ Credit card ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

	Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101	710	201 355	Utility filing fee	355
106	320	206 160	Design filing fee	0
107	490	207 245	Plant filing fee	0
108	710	208 355	Reissue filing fee	0
114	150	214 75	Provisional filing fee	0

**SUBTOTAL (1)** (\$) 355.00**2. EXTRA CLAIM FEES**

Extra Claims Fee from below Fee Paid  
 Total Claims 28 -20\*\* = 8 X 9 = 72  
 Independent Claims 2 -3\*\* = 0 X 40 = 0  
 Multiple Dependent        =       

	Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103	18	203 9	Claims in excess of 20
102	80	202 40	Independent claims in excess of 3
104	270	204 135	Multiple dependent claim, if not paid
109	80	209 40	** Reissue independent claims over original patent
110	18	210 9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)** (\$) 72.00

\*\*or number previously paid, if greater, For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

	Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	205 65	Surcharge - late filing fee or oath	
127	50	227 25	Surcharge - late provisional filing fee or cover sheet	
139	130	139 130	Non-English specification	
147	2,520	147 2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112 920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115	110	215 55	Extension for reply within first month	
116	390	216 195	Extension for reply within second month	
117	890	217 445	Extension for reply within third month	
118	1,390	218 695	Extension for reply within fourth month	
128	1,890	228 945	Extension for reply within fifth month	
119	310	219 155	Notice of Appeal	
120	310	220 155	Filing a brief in support of an appeal	
121	270	221 135	Request for oral hearing	
138	1,510	138 1,510	Petition to institute a public use proceeding	
140	110	240 55	Petition to revive - unavoidable	
141	1,240	241 620	Petition to revive - unintentional	
142	1,240	242 620	Utility issue fee (or reissue)	
143	440	243 220	Design issue fee	
144	600	244 300	Plant issue fee	
122	130	122 130	Petitions to the Commissioner	
123	50	123 50	Processing fee under 37 CFR 1.17(q)	
126	180	126 180	Submission of Information Disclosure Stmt	
581	40	581 40	Recording each patent assignment per property (times number of properties)	
146	710	246 355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249 355	For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279 355	Request for Continued Examination (RCE)	
169	900	169 900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** (\$) \_\_\_\_\_**SUBMITTED BY**

Name (Print/Type)	<u>Allen C. Turner</u>	Registration No. (Attorney/Agent)	<u>33,041</u>	Telephone	<u>(801) 532-1922</u>
Signature	<u>[Signature]</u>	Date	<u>12/26/2000</u>		

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

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